In re Fores	st Mosley	Ac
	Debtor(s)	
Case Number:	12-62688	
	(If known)	_

According to the calculations required by this statement:
■The applicable commitment period is 3 years.
☐The applicable commitment period is 5 years.
□Disposable income is determined under § 1325(b)(3).
■Disposable income is not determined under § 1325(b)(3).
(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

			REPORT OF INC	ONIE					
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.								
1	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.								
	b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.								
	All figures must reflect average monthly income rec						Column A		Column B
calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.					Debtor's Income		Spouse's Income		
2	Gross wages, salary, tips, bonuses, overtime, com	mis	sions.			\$	1,212.95	\$	2,416.00
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as								
		Φ.	Debtor		Spouse				
		\$ \$	0.00		0.00				
			otract Line b from I		0.00	\$	0.00	¢	0.00
	<u> </u>					Ф	0.00	Ф	0.00
	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV.								
4		Φ.	Debtor	Φ.	Spouse				
	a. Gross receipts	\$	0.00		0.00				
	b. Ordinary and necessary operating expenses c. Rent and other real property income		btract Line b from		0.00	\$	0.00	\$	0.00
		Su	biract Line o nom	Lille a					
5	Interest, dividends, and royalties.					\$	0.00	\$	0.00
6	Pension and retirement income.					\$	0.00	\$	0.00
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.			\$	0.00	\$	0.00		
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00			s	0.00	¢.	0.00		

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.						
	Debtor Spouse \$						
	a.	0.00	\$	0.00			
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	,212.95	\$	2,416.00			
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.						
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD						
12	Enter the amount from Line 11	\$		3,628.95			
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spot enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor of debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustment on a separate page. If the conditions for entering this adjustment do not apply, enter zero. S	ouse, for or the					
	c. \$ Total and enter on Line 13	\$		0.00			
14	Subtract Line 13 from Line 12 and enter the result.	\$		3,628.95			
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 enter the result.			43,547.40			
16	Applicable median family income. Enter the median family income for applicable state and household size. information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	(This		·			
	a. Enter debtor's state of residence: MI b. Enter debtor's household size: 2	\$		51,660.00			
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. ■ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitm top of page 1 of this statement and continue with this statement. □ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable committe top of page 1 of this statement and continue with this statement. 						
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOM	1E					
18	Enter the amount from Line 11.	\$		3,628.95			
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of t debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(suc payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.	he					
	b.						
	Total and enter on Line 19.						
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$ \$		3,628.95			
	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12			3,020.33			
21	enter the result.	\$		43,547.40			

22	Applic	cable median family incom	e. Enter the amount from	m Lin	e 16.			\$	51,660.00
	Applic	cation of § 1325(b)(3). Che	ck the applicable box ar	nd pro	ceed as direc	eted.			
23	23 The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determine 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.						ned unde	er §	
	■ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is n 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part VII of this statement.								
		Part IV. CA	ALCULATION ()F I	DEDUCT	IONS FR	OM INCOME		
		Subpart A: De	eductions under Star	ıdar	ds of the In	ternal Reve	nue Service (IRS)		
24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.						\$		
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.								
	Perso	ons under 65 years of age		Pers	ons 65 years	s of age or old	ler		
	a1.	Allowance per person		a2.	Allowance	per person			
	b1.	Number of persons		b2.	Number of	persons			
	c1.	Subtotal		c2.	Subtotal			\$	
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					\$			
25B	not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rent expense \$								
	b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 Not mortgage/rental expanse. Subtract Line b from Line a					¢			
26	c. Net mortgage/rental expense Subtract Line b from Line a. Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities					\$			

27A	included as a contribution to your nousehold expenses in Line 7. D					
	If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/	e "Operating Costs" amount from IRS Local e applicable Metropolitan Statistical Area or	\$			
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
28	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) □ □ □ or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average					
	a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	\$				
	b. 1, as stated in Line 47	\$				
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$			
29	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.					
	a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	\$				
	b. 2, as stated in Line 47	\$				
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$			
30	Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale	come taxes, self employment taxes, social	\$			
31	Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu	retirement contributions, union dues, and	\$			
32	Other Necessary Expenses: life insurance. Enter total average mon life insurance for yourself. Do not include premiums for insurance any other form of insurance.		\$			
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.					
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter					
35	Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. Do		\$			
36	Other Necessary Expenses: health care. Enter the total average mo health care that is required for the health and welfare of yourself or yoursurance or paid by a health savings account, and that is in excess of include payments for health insurance or health savings accounts	our dependents, that is not reimbursed by the amount entered in Line 24B. Do not	\$			

37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.					
38	Total l	Expenses Allowed under IRS Standards. Enter	the total of Lines 24 through 37.	\$		
		Subpart B: Addition	onal Living Expense Deductions			
		<u>-</u>	penses that you have listed in Lines 24-37			
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.					
39	a.	Health Insurance	\$			
	b.	Disability Insurance	\$			
	c.	Health Savings Account	\$			
	Total a	nd enter on Line 39		\$		
	If you below:		your actual total average monthly expenditures in the space			
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.					
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.					
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.					
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary					
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.			\$		
45	contrib		necessary for you to expend each month on charitable ts to a charitable organization as defined in 26 U.S.C. § 15% of your gross monthly income.	\$		
46	Total	Additional Expense Deductions under § 707(b)	Enter the total of Lines 20 through 45	\$		

		Subpart C: Deductions for De	bt Payment				
47	own, list the name of creditor, identic check whether the payment includes scheduled as contractually due to each	fy the property securing the debt, state to taxes or insurance. The Average Month ch Secured Creditor in the 60 months for tadditional entries on a separate page.	he Average Monthly aly Payment is the to allowing the filing of	y Payment, and otal of all amounts f the bankruptcy			
	Name of Creditor						
	a.		\$ Total: Add Lines	☐ ges ☐ lo	\$		
48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in						
	a.		\$		¢.		
49	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33.						
	Chapter 13 administrative expense resulting administrative expense.	s. Multiply the amount in Line a by the	amount in Line b, a	and enter the			
50	a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						
51		tive expense of chapter 13 case	Total: Multiply Li	ines a and b	\$		
51		t. Enter the total of Lines 47 through 5 Subpart D: Total Deductions f			\$		
52	1	e. Enter the total of Lines 38, 46, and 5			\$		
		NATION OF DISPOSABLE 1		ER § 1325(b)(2)			
53					\$		
Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.					\$		
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from						
56	Total of all deductions allowed und	ler § 707(b)(2). Enter the amount from	Line 52.		\$		

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	Deduction for special circumstances. If there are special circumstances is no reasonable alternative, describe the special circumstant. If necessary, list additional entries on a separate page. Total the eprovide your case trustee with documentation of these expens of the special circumstances that make such expense necessary.	nces and the resulting expenses in lines a-c below expenses and enter the total in Line 57. You new es and you must provide a detailed explanate	ow. nust
57	Nature of special circumstances	Amount of Expense	
	a.	\$	
	b.	\$	
	c.	\$	
		Total: Add Lines	\$
58	Total adjustments to determine disposable income. Add the arresult.	mounts on Lines 54, 55, 56, and 57 and enter t	he \$
59	Monthly Disposable Income Under § 1325(b)(2). Subtract Lin	e 58 from Line 53 and enter the result.	\$
	Part VI. ADDITIONAL	L EXPENSE CLAIMS	
	Other Expenses. List and describe any monthly expenses, not of of you and your family and that you contend should be an addition 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate them. Total the expenses.	onal deduction from your current monthly inco	ome under §
60	Expense Description	Monthly Amo	ount
	a.	\$	
	b.	\$	
	c.	\$	
	d.	\$	
	Total: Add Lines a	a, b, c and d \$	
	Part VII. VER	IFICATION	
61	I declare under penalty of perjury that the information provided i must sign.) Date: October 16, 2012	Signature: /s/ Forest Mosley	a joint case, both debtors
		Forest Mosley (Debtor)	

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **04/01/2012** to **09/30/2012**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Pension**

Constant income of \$1,212.95 per month.

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **04/01/2012** to **09/30/2012**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Pension

Constant income of \$2,416.00 per month.